

Please type a plus sign (+) inside this box → +

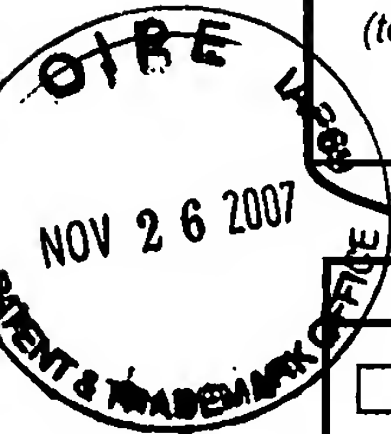
HDP/SB/21 based on PTO/SB/21 (08-00)

to RCE \$

# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	10/645,500
Filing Date	August 22, 2003
Inventor(s)	Gerold HEROLD et al.
Group Art Unit	2167
Examiner Name	Kimberly M. Lovel
Attorney Docket Number	32860-000610/US

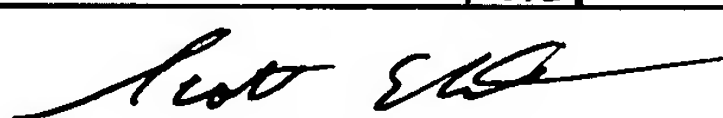


## ENCLOSURES (check all that apply)

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form<br><br><input checked="" type="checkbox"/> Fee Attached<br><br><input checked="" type="checkbox"/> Amendment<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input type="checkbox"/> Extension of Time Request<br><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><br><input type="checkbox"/> Letter to the Official Draftsperson and _____ Sheets of Formal Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><br><input type="checkbox"/> LETTER SUBMITTING APPEAL BRIEF AND APPEAL BRIEF (w/clean version of pending claims)<br><br><input type="checkbox"/> Appeal Communication to Group (Notice of Appeal, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><br><b>Request for Continued Examination</b> |
|---|--|---|

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C. For	Attorney Name Donald J. Daley	Reg. No. 34,313
Signature	 55,149		
Date	November 26, 2007		

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